Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee Community Outreach Group LLC Mailing Address 1110 Vermont Ave N.W. #300	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Washington DC 20005	70369.08 Transaction ID : B621423 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	08
Name of Federal Candidate Hillary Clinton Offic Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary X General Other (specify) ▶
Full Name of Payee Planned Parenthood Advocates of Ohio	Date of Public Distribution/Dissemination 08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.	Amount
City State Zip Code Columbus OH 43215	Transaction ID : B621425 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	08 / 02 / 2016
Hillary Clinton	ce Sought: House District: President Senate State: US
Calendar Year-To-Date Per Election for Office Sought Disb 2016	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	79281.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date	08

Schedule E)	FENDENT EXPEND	TOTILO		PAGE 2 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report X 48-hour	report New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Advo	cates of Ohio		M = M	lic Distribution/Dissemination
Mailing Address 206 E State St.			08 Amount	02 2016
City Columbus	State OH	Zip Code 43215		4456.07 ID: B621432
Purpose of Expenditure Phone calls		Category/ Type 004	Date of Disk	oursement or Obligation / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Hillary Clinton Calendar Year-To-Date		Oppose	Disbursement For:	Senate State: US Primary General
Per Election for Office Sought Full Name of Payee	7 7	547303.02		specify)
Planned Parenthood Advoca	tes of Ohio		08	02 / 2016
Mailing Address 206 E State St.			Amount	
City Columbus	State OH	Zip Code 43215		5941.41 ID: B621444 bursement or Obligation
Purpose of Expenditure Events		Category/ Type 004	08	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Hillary Clinton		Support	Office Sought:	House District:US
Calendar Year-To-Date Per Election for Office Sought		Oppose 547303.02	Disbursement For:	Senate State: US Primary ☐ General Specify) ▶
_	, ,		Other (
(a) SUBTOTAL of Itemized Independent	Expenditures		>	10397.48
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		·· •	
(c) TOTAL Independent Expenditures			· •	2 2
Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party committee	any candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	9 08 04	2016

Schedule E)	NOENT EXICIO	THORIEG	⊢	PAGE 3 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				ENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report X 48-hour rep	oort New rep	port Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Rocky M	lountains Action	Fund	M = M /	Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			08 Amount	03 2016
City Denver	State CO	Zip Code 80207	Transaction IE	2792.50 D : B621446
Purpose of Expenditure Phone calls		Category/ Type 004		sement or Obligation
Name of Federal Candidate		Support	Office Sought:	House District:
Hillary Clinton Calendar Year-To-Date		Oppose	President Disbursement For:	Senate State: US Primary General
Per Election for Office Sought Full Name of Payee	, , , ,	547303.02	Other (spe	ecify) Distribution/Dissemination
Community Outreach Group LL			08	03 / 2016
THE VEHICLE WE			Amount	
City Washington	State DC	Zip Code 20005	Transaction ID Date of Disbur	25250.70 : B621443 resement or Obligation
Purpose of Expenditure Events		Category/ Type 004	08	03 / 2016
Name of Federal Candidate Hillary Clinton		Support Oppose	Office Sought: President	House District: Senate State: US
Calendar Year-To-Date Per Election for Office Sought		547303.02	Disbursement For: 2016 Other (spe	Primary X General
(a) SUBTOTAL of Itemized Independent Ex	penditures		>	28043.20
(b) SUBTOTAL of Unitemized Independent	Expenditures		. •	
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize			
Deirdre Schifeling Signature	[Electron	nically Filed] Date	08 / 04	2016

Schedule E)	EXI END	TOTILO				PAGE 4 FOR SE OF F	OF 15	
NAME OF COMMITTEE (In Full)					FEC ID	ENTIFICATION		,
Planned Parenthood Votes						C00489799		
Check if 24-hour report X 48-hour report	New repo	ort Am	ends repo	rt filed on	- M /	D D /	Y = Y = Y	
Full Name of Payee Planned Parenthood Rocky Mountai	ins Action	Fund			- M /	Distribution/D	Y Y Y Y	1
Mailing Address 7155 E. 38th Avenue				Amou	08 nt	03	2016	_
City	State	Zip Code					1241.10	1
Denver	CO	80207				D: B621450 irsement or Ob		_
Purpose of Expenditure Events		Category/ Type	004	N	08	03	2016]
Name of Federal Candidate		Xs	Support	Office Sough	t:	House D	istrict:	_
Hillary Clinton			Oppose	X Preside			State: US	_
Calendar Year-To-Date Per Election for Office Sought	, , , ,	547303.02		Disbursemen 2016 O		Primary	X General	_
Full Name of Payee Community Outreach Group LLC Mailing Address 1110 Vermont Ave N.W. #300					08 ^M	c Distribution/D	Dissemination Y Y Y Y Y 2016]
City	State	Zip Code					25250.72	1
Washington	DC	20005				D: B621437 ursement or Ob	oligation	1
Purpose of Expenditure Canvassing		Category/ Type	004		08	03	2016	
Name of Federal Candidate		X	Support	Office Sough	t:	House D	istrict:	_
Hillary Clinton			Oppose	X Preside	ent	Senate	State: US	_
Calendar Year-To-Date Per Election for Office Sought	, , ,	547303.02		Disbursemer 2016		Primary Decify) ►	X General	1
(a) SUBTOTAL of Itemized Independent Expenditures	S						26491.82]
(b) SUBTOTAL of Unitemized Independent Expenditu	res			•	-7		1.0	
(c) TOTAL Independent Expenditures				•	- 4	7	1 4]
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized							
Deirdre Schifeling	[Electron	ically Filed]	Date	08	04	2016	Y	
Signature								

Sche	edule E)	L /(1 L /(2)					PAGE 5 OF 15 FOR SE OF FORM 24/48
	OF COMMITTEE (In Full)					FEC ID	DENTIFICATION NUMBER ▼
Pla	nned Parenthood Votes					С	C00489799
Check	c if 24-hour report X 48-hour report	New repo	ort Am	nends repo	ort filed on	M = M /	D = D / Y = Y = Y
	ull Name of Payee Community Outreach Group LLC				Da	M = M /	c Distribution/Dissemination
М	lailing Address 1110 Vermont Ave N.W. #300				Am	08 nount	03 2016
Ci	ity	State	Zip Code				31563.40
- 1	Vashington	DC	20005				ID: B621439 ursement or Obligation
	urpose of Expenditure Phone Calls		Category/ Type	004		08 /	03 2016
Na	ame of Federal Candidate		X	Support	Office Sou	ught:	House District:
Н	fillary Clinton			Oppose	X Pres		Senate State: US
	Calendar Year-To-Date Per Election for Office Sought	7 7	547303.02		Disbursen 2016	nent For: Other (sp	Primary
	ull Name of Payee _atino Decisions failing Address 15 South Grady Way, Suite 620					te of Public 08	c Distribution/Dissemination
C	Sity	State	Zip Code		<u> —</u> г		14050.00
- 1	Seattle	WA	98057				D: B621451 ursement or Obligation
	rurpose of Expenditure Polling		Category/ Type	004		08	04 2016
N	lame of Federal Candidate			Support	Office So	ught:	House District:
Н	Hillary Clinton			Oppose	X Pre	sident	Senate State: US
	Calendar Year-To-Date Per Election for Office Sought	,	547303.02		Disbursen 2016	nent For:	Primary ⊠ General Decify) ▶
(a)	SUBTOTAL of Itemized Independent Expenditures	3					45613.40
(b)	SUBTOTAL of Unitemized Independent Expenditure	ires			· •		1 2 1 2
(c)	TOTAL Independent Expenditures				•		114114
with	der penalty of perjury I certify that the independen h, or at the request or suggestion of, any candidate ty committee) any political party committee or its a	e or authorized					
_	Deirdre Schifeling	[Electron	ically Filed]	Date	e 08	/ 04	2016
	Signature						

Schedule E)	20	PAGE 6 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report X 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Community Outreach Group LLC		of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300	Amou	08 03 2016 unt
City State Zip C Washington DC 20008		31563.40 saction ID : B621441
Purpose of Expenditure Phone calls Cate		of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Catherine Cortez-Masto	Support Office Sough Oppose Preside	
Calendar Year-To-Date Per Election for Office Sought 1364	Disbursemer 2016	nt For: Primary X General
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund Mailing Address 7155 E. 38th Avenue	Date	of Public Distribution/Dissemination M M M / D D 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip C Denver CO 8020	dode 17 Trans	2792.50 action ID : B621449 of Disbursement or Obligation
Purpose of Expenditure Phone calls Cate	egory/ Type 004	M 08 / 03 / Y 2016
Name of Federal Candidate Catherine Cortez-Masto	Support Office Soug Oppose Presid	NIV
Calendar Year-To-Date Per Election for Office Sought	Disburseme 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	·	34355.90
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized commarty committee) any political party committee or its agent.		
Deirdre Schifeling [Electronically F	Filed] Date 08	04 / 2016

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
	0 300433733
Check if 24-hour report X 48-hour report N	lew report Amends report filed on Amends report
Full Name of Payee	Date of Public Distribution/Dissemination
Community Outreach Group LLC	08 / 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State	Zip Code 25250.72
Washington DC	20005 Transaction ID : B621435 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing	Category/ Type 004 08 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District:
Catherine Cortez-Masto	Oppose President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Community Outreach Group LLC	08
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State	Zip Code 25250.72
Washington DC	20005 Transaction ID : B621434 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing	Category/ Type 004 08 08 03 2016
Name of Federal Candidate	Support Office Sought: House District:
Joseph Heck	Oppose President X Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
. , , , , , , , , , , , , , , , , , , ,	nditures reported herein were not made in cooperation, consultation, or concert thorized committee or agent of either, or (if the reporting entity is not a political
Deirdre Schifeling [H	Electronically Filed] Date 08 04 2016
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Schedule E)	LIVI LXI LIVI	JII OI LO	PAGE 8 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report X 48-hour report	New re	port Amends repo	rt filed on
Full Name of Payee Planned Parenthood Rocky Mou	ntains Action	ı Fund	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			08 03 2016 Amount
0.1	Otata	7'- O- I-	07700 F0
City Denver	State CO	Zip Code 80207	2792.50 Transaction ID : B621448 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls		Category/ Type 004	08 / 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Joseph Heck		X Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		136468.50	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #30	0		08 03 2016 Amount
City	State	Zip Code	31563.40
Washington	DC	20005	Transaction ID : B621442 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls		Category/ Type 004	08 / 03 / 2016
Name of Federal Candidate		Support	Office Sought: House District:
Joseph Heck		X Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		136468.50	Disbursement For: Primary General 2016 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	litures		. ▶ 34355.90
(b) SUBTOTAL of Unitemized Independent Expe	enditures		
			4 4
(c) TOTAL Independent Expenditures			>
	didate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Deirdre Schifeling Signature	[Electro	onically Filed] Date	08 04 7 2016

	silicatic Ly	FOR SE OF FORM 24/48
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
٢	Planned Parenthood Votes	C C00489799
Ch	neck if 24-hour report X 48-hour report New report Amends report file	d on M M / D D / Y Y Y Y
	Full Name of Payee	Date of Public Distribution/Dissemination
	Community Outreach Group LLC	08 02 2016
	Mailing Address 1110 Vermont Ave N.W. #300	Amount
	City State Zip Code	70369.08
	Washington DC 20005	Transaction ID : B621421 Date of Disbursement or Obligation
	Purpose of Expenditure Canvassing Category/ Type 004	08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Offi	ce Sought: House District:
	Rob Portman Oppose	President Senate State: OH
	Calendar Year-To-Date Per Election for Office Sought Disl 201	
	5 H.M. (D.	Other (specify) -
	Full Name of Payee Planned Parenthood Advocates of Ohio	Date of Public Distribution/Dissemination
	Mailing Address 206 E State St.	08 02 2016 Amount
	City State Zip Code	8912.13
	Columbus OH 43215	Transaction ID : B621428 Date of Disbursement or Obligation
	Purpose of Expenditure Canvassing Category/ Type 004	08 02 2016
	Name of Federal Candidate Support Offi	ce Sought: House District:
	Rob Portman Oppose	President Senate State: OH
	Calendar Year-To-Date Per Election for Office Sought Dis 201	bursement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	79281.21
	(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	Deirdre Schifeling [Electronically Filed] Date	08 04 2016
	Signature	

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OF

Schedule E)				PAGE 10 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report X 48-hour	report New report	ort Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Advoc	ates of Ohio		M = M	Distribution/Dissemination
Mailing Address 206 E State St.			08 Amount	02 2016
City Columbus	State OH	Zip Code 43215	Transaction I	
Purpose of Expenditure Phone calls		Category/ Type 004	Date of Disbu	ursement or Obligation 02
Name of Federal Candidate		Support	Office Sought:	House District:
Rob Portman		Support Oppose		Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	,	593239.64	Disbursement For: 2016 Other (sp	Primary
Full Name of Payee Planned Parenthood Advocate	es of Ohio		Date of Publi	c Distribution/Dissemination
Mailing Address 206 E State St.			Amount	22 2010
City	State	Zip Code		4456.07
Columbus Durage of Evapoliture	ОН	43215	Transaction II Date of Disbu	D: B621430 ursement or Obligation
Purpose of Expenditure Phone calls		Category/ Type 004	08	02 / 2016
Name of Federal Candidate Ted Strickland		Support Oppose	Office Sought:	House District:
Calendar Year-To-Date Per Election for Office Sought		593239.64	Disbursement For: 2016 Other (sp	Primary X General
(a) SUBTOTAL of Itemized Independent	Expenditures		•	8912.14
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	08 / 04	2016

,	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Community Outreach Group LLC	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State Zip Code	70369.08
Washington DC 20005	Transaction ID : B621422 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	08 / 02 / 2016
Name of Federal Candidate Support	Office Sought: House District:
Ted Strickland Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 593239.64	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Advocates of Ohio	08
Mailing Address 206 E State St.	Amount
City State Zip Code	8912.13
Columbus OH 43215	Transaction ID : B621427 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	08 / 02 / 2016
Name of Federal Candidate Support	Office Sought: House District:
Ted Strickland Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 593239.64	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	> 79281.21
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date	9 08 04 2016
Signature	

PAGE

OF

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
	O
Check if 24-hour report X 48-hour report New report Amends report file	ed on M M / D D / Y Y Y Y
Full Name of Payee Community Outreach Group LLC	Date of Public Distribution/Dissemination
Community Oddieach Group LLC	08 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State Zip Code	70369.08
Washington DC 20005	Transaction ID : B621424 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offi	ce Sought: House District:
Donald Trump Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought Dis 201	bursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Advocates of Ohio	08
Mailing Address 206 E State St.	Amount
City State Zip Code	4456.07
Columbus OH 43215	Transaction ID : B621431 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls Category/ Type 004	08 / 02 / 2016
Name of Foderal Condidate	
Support Oil	ice Sought: House District:
Д Оррозе /	Senate State:
Calendar Year-To-Date Per Election for Office Sought 547303.02	bursement For: Primary General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	74825.15
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date	08
Signature	

Schedule E)	LINDENT EXICIO	HOHLO	PAGE 13 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report X 48-hour r	eport New rep	port Amends repo	ort filed on
Full Name of Payee Planned Parenthood Advoca	ates of Ohio		Date of Public Distribution/Dissemination
Mailing Address 206 E State St.			08 02 2016 Amount
City Columbus	State OH	Zip Code 43215	8912.13 Transaction ID : B621426
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Donald Trump		X Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought		547303.02	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
Full Name of Payee Community Outreach Group L	LC		Date of Public Distribution/Dissemination 08
Mailing Address 1110 Vermont Ave N.	N. #300		Amount
City Washington	State DC	Zip Code 20005	25250.72 Transaction ID : B621436
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Donald Trump		X Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought		547303.02	Disbursement For: Primary ☐ General 2016 Other (specify) ►
(a) SUBTOTAL of Itemized Independent E	Expenditures		▶ 34162.85
(b) SUBTOTAL of Unitemized Independen	nt Expenditures		·
(c) TOTAL Independent Expenditures			
	ny candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Deirdre Schifeling Signature	[Electron	nically Filed] Date	9 08 04 2016

,				FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes				C C00489799		
Check if 24-hour report X 48-hour report	X New repo	ort Amends repo		M / D D / Y Y Y Y Y		
Full Name of Payee			Date of	of Public Distribution/Dissemination		
Community Outreach Group LLC	IM	08 03 2016				
Mailing Address 1110 Vermont Ave N.W. #300			Amou	nt		
City	State Zip Code			31563.40		
Washington	DC 20005			Transaction ID : B621440 Date of Disbursement or Obligation		
Purpose of Expenditure Phone calls		Category/ Type 004		08		
Name of Federal Candidate		Support	Office Sough	t: House District:		
Donald Trump		X Oppose	X Preside			
Calendar Year-To-Date Per Election for Office Sought		547303.02	Disbursemen 2016 O	t For: Primary X General ther (specify) ▶		
Full Name of Payee Planned Parenthood Rocky Mountains Mailing Address 7155 E. 38th Avenue	Action Fun	d		of Public Distribution/Dissemination		
City	State	Zip Code		2792.50		
Denver	CO	80207		action ID : B621447		
Purpose of Expenditure Phone calls		Category/ Type 004		of Disbursement or Obligation 08 08 08 08 08 08 08		
Name of Federal Candidate		Support	Office Sough	nt: House District:		
Donald Trump		Oppose	X Preside	ent Senate State: US		
Calendar Year-To-Date Per Election for Office Sought		547303.02	Disbursemer 2016 C	nt For:		
(a) SUBTOTAL of Itemized Independent Expenditures			•	34355.90		
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7		
(c) TOTAL Independent Expenditures			· [7 1 7 1 7		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Deirdre Schifeling Signature	[Electroni	ically Filed] Date	08	04 / 2016		
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	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes	C C00489799		
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y		
	te of Public Distribution/Dissemination		
Latino Decisions	08		
Mailing Address 15 South Grady Way, Suite 620	nount		
City State Zip Code	14050.00		
	Transaction ID : B621452 Date of Disbursement or Obligation		
Purpose of Expenditure Polling Category/ Type 004	08		
Name of Federal Candidate Support Office Sou	ught: House District:		
Donald Trump Oppose Pres	sident Senate State: US		
Calendar Year-To-Date Per Election for Office Sought Disbursem 2016	nent For: Primary		
Full Name of Payee Dat	te of Public Distribution/Dissemination		
Date of Fayor	M M / D D / Y Y Y Y		
Mailing Address Am	nount		
City State Zip Code			
Dat	te of Disbursement or Obligation		
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y = Y		
Name of Federal Candidate Support Office Sou	ught: House District:		
Oppose Pres	sident Senate State:		
Calendar Year-To-Date Disbursem			
Per Election for Office Sought	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	14050.00		
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7		
(c) TOTAL Independent Expenditures	633908.81		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or a party committee) any political party committee or its agent.			
Deirdre Schifeling [Electronically Filed] Date 08	/ 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

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